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Bib Data Sheet

SERIAL NUMBER 09/662,454	FILING DATE 09/14/2000 RULE	CLASS 424	GROUP ART UNIT 1633	ATTORNEY DOCKET NO. 2026-4276US1
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APPLICANTS

Masayuki Yanagi, Rockville, MD ;
Jens Bukh, Bethesda, MD ;
Suzanne U. Emerson, Rockville, MD ;
Robert H. Purcell, Boyds, MD ;

OK

** CONTINUING DATA *Priority of 09/04/416 01/27/1998 6,153,431*
THIS APPLN CLAIMS BENEFIT OF 60/053,062 07/18/1997

** FOREIGN APPLICATIONS *OK*

IF REQUIRED, FOREIGN FILING LICENSE

GRANTED ** 11/20/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance
Verified and Acknowledged	Examiner's Signature <i>ABD</i> Initials
STATE OR COUNTRY	MD
SHEETS DRAWING	49
TOTAL CLAIMS	26
INDEPENDENT CLAIMS	4

ADDRESS

Patent Branch
Office of Technology Transfer
National Institutes of Health Box 13
3011 Executive Boulevard Suite 325
Rockville ,MD 20852

TITLE

Cloned genomes of infectious hepatitis C viruses and uses thereof

FILING FEE RECEIVED 1136	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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BIBDATASHEET

CONFIRMATION NO. 9114

Bib Data Sheet

SERIAL NUMBER 09/662,454	FILING OR 371(c) DATE 09/14/2000 RULE	CLASS 435	GROUP ART UNIT 1633	ATTORNEY DOCKET NO. 2026-4276US1
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APPLICANTS

Masayuki Yanagi, Rockville, MD;
 Jens Bukh, Bethesda, MD;
 Suzanne U. Emerson, Rockville, MD;
 Robert H. Purcell, Boyds, MD;

** CONTINUING DATA *****

This application is a DIV of 09/014,416 01/27/1998 PAT 6,153,421
 which claims benefit of 60/053,062 07/18/1997

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 11/20/2000

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MD	SHEETS DRAWING 49	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

ADDRESS

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TITLE

Cloned genomes of infectious hepatitis C viruses and uses thereof

FILING FEE RECEIVED 1136	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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